## COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION, BUREAU OF INSURANCE AUDITED FINANCIAL STATEMENTS EXEMPTION AFFIDAVIT YEAR ENDED DECEMBER 31, 2004

Company Name ************************************	*****	NAIC Group/Co. Code
14 VAC-5-270 of the Virginia Administrative financial report by an accountant <b>EXCEPT</b> who or certificateholders <b>AND</b> less than \$1 million of the annual statement date. An insurer has pursuant to contracts and/or treaties of reinsurant	e Code requi en the insure in direct writ ving assumed	res the filing of an annual audited r has fewer than 1,000 policyholders tten premiums <b>IN ALL STATES</b> as d premiums of \$1 million or more
For the year ended December 31:		
TOTAL DIRECT PREMIUMS are \$ALL DIRECT PREMIUMS).		(MUST be less than \$1 million for
A	ND	
<b>TOTAL</b> number of policyholders or certification in the policyholders of certification in the policyholder i		
A	ND	
TOTAL ASSUMED PREMIUMS are \$		(MUST be less than \$1 million).
PLEASE NOTE: ALL requirements must be	met to qualify	for this exemption.
************	******	***********
Preparer's Name	Telepho	ne No. ()
Dated and signed this day of		
(Name of Officer) says that the answers to the questions and the declar		orn according to law, deposes and ed in this affidavit are true and correct.
(Signature of Officer)		(Title)
State of		
City/County of		
Personally appeared before me the above named_personally known to me, who, being duly sworn instrument and that the statements and answers conknowledge and belief.		
Subscribed and sworn to before me this day	of	, 20
(SEAL)		
		Notary Public
My Commission	n Expires:	